FILE NOW: FILING FEE AFTER MAY 15

PROFIT CORPORATION **ANNUAL REPORT**

19987



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT

P95000005132 (2)

TYKE'S RECORDS ENTERTAINMENT COMPANY

Principal Place of Business Mailing Address					
1333 SUNSE DAYTONA B	ET BLVD. EACH FL 32117	1333 SUNSET BLVD. Daytona Beach Fl	32117		
					3. Date Incorporated or Qualified 3a. Date of Last Report
2. Principal Pla 21	ace of Business	2a. Mailing Address 26			4. FEI Number Applied For 59-3299712 Not Applied by
Suite, Apt. 4	V. etc.	Sulte, Apt. #, etc.			\$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
Olty & State	•	City & State			6. Election Campaign Financing \$5.00 May Be
23 Zip	Country		Countr		Trust Fund Contribution Added to Fees 8, This corporation has liability for intangible tax under s 199.032,
24	25	29	30	,	Florida Statutes
				10. Name and Address of New Registered Agent	
*41.4.1.4			8.	1 Name	
WALKER, TYRONE C JR. 1333 SUNSET BLVD.			82	2 Street A	ddress (P.O. Box Number is Not Acceptable)
	NA BEACH FL 32117		8:	3	
- WALLO	TA DENOTITE DETTI				
·			8	City	FL 85 Zip Code
 Pursuant to proper to the property of the propert	o the provisions of Sections 607.050	2 and 607.1508, Florida Statute	es, the above	named corp	rporation submits this statement for the purpose of changing its registered office
femiliar wit	h, and accept the obligations of, Se	tion 607,0505, Florida Statutes		pyration b b	poard of directors. I horeby accept the appointment as registered agent. I am
SIGNATURE _	Signature type for printed name of registered ager	nt and title If anolicable (NO	TE: Repistered Ag	ont signature reg	quired when reinstating) 5/17/9-
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1, 1 TITLE		☐ Change ☐ Addition
NAME	WALKER, TYRONE C JR.	•	1.2 NAME		
STREET ADDRESS	1333 SUNSET BLVD. Daytona Beach FL 3211	7	- I	1 ADDRESS	
CITY-ST-ZIP TITLE	DATIONA DENOTITE 0211	DELETE	1.4 CITY - 2. 1 TITUE		☐ Change ☐ Addition
NAME		<u></u>	2.2 NAME		_ comigo receiver
STREET ADDRESS			2.3 STREE	T ADDRESS	
CITY-ST-ZIP	·		2.4 CITY-	ST-ZIP	
TITLE		☐ DELETE	3. 1 TITLE		Change Addition
NAME STREET ADDRESS			3.2 NAME		
CITY-ST-ZIP			3.3. STHE 3.4 CITY-	ET ADDRESS ST-ZIP	
TITLE		☐ DELETE	4. 1 THE		☐ Change ☐ Addition
NAME			4.2 NAME	i.	Y .
STREET ADORESS			4.3 STREE	T ADDRESS	.\
CITY-ST-ZIP		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	4 4 CITY-		Change Addition
TITLE NAME			5. 1 TITLE 5.2 Name		Change Addition
STREET ADDRESS				T ADDRESS	\mathbf{K}'
CITY-ST-ZIP			5.4 CITY-		
TITLE		☐ DELETE	6. 1 TITLE		400002202184 Addition -06/05/9701002005
NAME			6.2 NAME		-06/05/9701002005
STREET ADDRESS				T ADDRESS	***175.00
CITY-ST-7IP	· -		64 CITY-	KILDP 1	

6.9 STREET ADDRESS 6.4 CITY+ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Blook 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

FILED

May 22 1997 8:00am

Secretary of State